| Please type a plus sign (+) inside this box -> + |
|--|
|--|

PTO/SB/01 (3-97)

Approved for use through 9/30/98. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

|  | Attorney Docket Number |                  |  |  |  |
|--|------------------------|------------------|--|--|--|
| DECLARATION FOR                          | First Named Inventor   | JOSEPH C. ANDERS |  |  |  |
| UTILITY OR DESIGN                        | COMPLETE IF KNOWN      |                  |  |  |  |
| PATENT APPLICATION                       | Application Number     |                  |  |  |  |
| Declaration Submitted OR Submitted after | Filing Date            |                  |  |  |  |
|  | Group Art Unit         |                  |  |  |  |
| with Initial Initial Filling Filling     | Examiner Name          |                  |  |  |  |
|  |                        |                  |  |  |  |

|  |  | <u> </u>   |   |  |  |  |  |
|--|--|--|---|--|--|--|--|
| As a below named inventor, I hereby declare that:  |  |  |   |  |  |  |  |
| My residence, post office  | address, and citizenship are a   | s stated below next to my  | name.   |  |  |  |  |
| I believe I am the original.   | first and sole inventor (il only   | one name is listed below)  | or an original. fir   | st and joint inventor  | (if plurat   |  |  |
| names are listed below) o  | if the subject matter which is c   | almed and for which a pe   | no Irigues ai mes   | the invention entitle  | xd:  |  |  |
|  |  |  |   |  | :4   |  |  |
| TELEPHONE  | SYSTEM   |  |   |  |  |  |  |
| the specification of which   |  | of the Invention)  |   |  |  |  |  |
| is attached hereto   |  |  |   |  |  |  |  |
| OR   |  |  |   |  |  |  |  |
| was filed on (MM/  | DOMM)  | as Unite   | ed States Applica   | tion Number or PC  | [ International  |  |  |
| Application Number   | and we   | a amended on (MM/DD/)  | m   |  | (if applicable).   |  |  |
| I hereby state that I have t   | reviewed and understand the d  | contents of the above iden   | tifled specificatio   | n, including the clai  | ms, as   |  |  |
|  | ent specifically referred to abo   |  |   | Control Code   | <b>5</b>   |  |  |
| i actinownedge the quity to<br>§ 1.58.   | disclose information which is r  | natemat to patentacimy as  | ceamed to 1108 3  | / Code of Federal  | Hagulations,   |  |  |
| 3  |  |  |   |  |  |  |  |
| I hereby claim foreign prior<br>patent or inventor's certifica<br>United States of America,  | tty benefits under Title 35. Un<br>its or \$355 (a) of any PCT int<br>flated below and have also id<br>any PCT international applica   | emational application whi<br>entified below, by check  | ch dealgnated at<br>ing the box, any  | least one country o<br>foreign application   | ther than the for patent or  |  |  |
| I hereby claim foreign prior<br>patent or inventor's certifica<br>United States of America,<br>inventor's certificate, or of<br>claimed.<br>Prior Foreign Application  | tio, or \$365 (a) of any PCT intilitied below and have also id<br>any PCT international applica  | emational application whi<br>entillad below, by check<br>tion having a filing date t<br>Foreign Filing Date  | ch designated at ing the box, any before that of the priority   | least one country of<br>loreign application<br>application on whit<br>Cartified Copy   | ther than the for patent or ich priority is Attached?              |  |  |
| I hereby claim foreign prior<br>patem or inventor's certifica<br>United States of America,<br>inventor's certificate, or of<br>claimed.  | ité, or \$385 (a) of any PCT intilisted below and have also id<br>any PCT international applica  | emational application whi<br>entified below, by check<br>tion having a filing date t   | ch designated at ing the box, any before that of the priority   | least one country of<br>foreign application<br>application on whi  | ther than the<br>for patent or<br>ich priority is                  |  |  |
| I hereby claim foreign prior<br>patent or inventor's certifica<br>United States of America,<br>inventor's certificate, or of<br>claimed.<br>Prior Foreign Application  | tio, or \$365 (a) of any PCT intilitied below and have also id<br>any PCT international applica  | emational application whi<br>entillad below, by check<br>tion having a filing date t<br>Foreign Filing Date  | ch designated at ing the box, any before that of the priority   | least one country of<br>loreign application<br>application on whit<br>Cartifled Copy   | ther than the for patent or ich priority is Attached?              |  |  |
| I hereby claim foreign prior<br>patent or inventor's certifica<br>United States of America,<br>inventor's certificate, or of<br>claimed.<br>Prior Foreign Application  | tio, or \$365 (a) of any PCT intilitied below and have also id<br>any PCT international applica  | emational application whi<br>entillad below, by check<br>tion having a filing date t<br>Foreign Filing Date  | ch designated at ing the box, any before that of the priority   | least one country of<br>loreign application<br>application on whit<br>Cartifled Copy   | ther than the for patent or ich priority is Attached?              |  |  |
| I hereby claim foreign prior<br>patent or inventor's certifica<br>United States of America,<br>inventor's certificate, or of<br>claimed.<br>Prior Foreign Application  | tio, or \$365 (a) of any PCT intilitied below and have also id<br>any PCT international applica  | emational application whi<br>entillad below, by check<br>tion having a filing date t<br>Foreign Filing Date  | ch designated at ing the box, any before that of the priority   | least one country of<br>loreign application<br>application on whit<br>Cartifled Copy   | ther than the for patent or ich priority is Attached?              |  |  |
| I hereby claim foreign prior<br>patent or inventor's certifica<br>United States of America,<br>inventor's certificate, or of<br>claimed.<br>Prior Foreign Application  | tio, or \$365 (a) of any PCT intilitied below and have also id<br>any PCT international applica  | emational application whi<br>entillad below, by check<br>tion having a filing date t<br>Foreign Filing Date  | ch designated at ing the box, any before that of the priority   | least one country of<br>loreign application<br>application on whit<br>Cartifled Copy   | ther than the for patent or ich priority is Attached?              |  |  |
| I hereby claim foreign prior patent or inventoris certifica United States of America, inventor's certificate, or of claimed.  Prior Foreign Application Number(s)  | its or \$365 (a) of any PCT intilisted below and have also id any PCT international applica  Country   | emational application whi<br>entitled below, by checks<br>don having a filing date to<br>Foreign Filing Da<br>(IMI/DO/YYYY)  | ch designated at ing the box, any persons that of the Priority Not Claimed  | least one country or foreign application application on white Certified Copy YES   | Attached?  |  |  |
| I hereby claim foreign prior patent or inventor's certifica United States of America, inventor's certificate, or of claimed.  Prior Foreign Application Number(s)  | tis or \$365 (a) of any PCT intilisted below and have also id any PCT international applica  Country  Country  | emational application while chilled below, by check don having a filing date to Foreign Filing Date (1884/DD/YYYY)  supplemental priority data   | th designated at mig the box, any persons that of the Priority Not Claimed  | least one country of toreign application application on white Certified Copy YES   | Attached?  NO  |  |  |
| I hereby claim foreign prior patent or inventor's certificate, or of claimed.  Prior Foreign Application Number(s)  Additional foreign application I hereby claim the benefit of the patents.  | tib. or \$365 (a) of any PCT intelligence below and have also identify PCT international applications.  Country  Country  cation numbers are fisted on a under Title 35, United States               | emational application while chilled below, by check too having a filing date to foreign Filing Date (NM/DD/YYYY)  supplemental priority date Code § 119(e) of any Unit   | th designated at ing the box, any persons that of the Priority Not Chairned   | least one country of foreign application application on white Control Copy YES  Cartified Copy YES  Cartified Copy  YES  Cartified Copy  YES  Cartified Copy  YES  Cartified Copy  YES | Attached?  NO  |  |  |
| I hereby claim foreign prior patent or inventor's certifica United States of America, inventor's certificate, or of claimed.  Prior Foreign Application Number(s)  Additional foreign application in the patent of the patent in the patent of t | tis or \$355 (a) of any PCT intellisted below and have also idenly PCT international applications.  Country  Country  cation numbers are listed on a under Title 35, United States (a)  Filling Date | emational application while chilled below, by check don having a filing date to having a filing date to the children of the ch | th designated at ing the box, any periors that of the Priority Not Chained  a sheet PTO/SBA  Addition  Addition     | least one country of foreign application application on white Cartified Copy YES   | Attached?  NO  |  |  |
| I hereby claim foreign prior patent or inventor's certificate, or of claimed.  Prior Foreign Application Number(s)  Additional foreign application I hereby claim the benefit of the patents.  | tib. or \$365 (a) of any PCT intelligence below and have also identify PCT international applications.  Country  Country  cation numbers are fisted on a under Title 35, United States               | emational application while chilled below, by check too having a filing date to having a filing date to the children of the ch | in designated at ing the box, any persons that of the Priority Not Chairned  a sheet PTO/SBA  Addition numbe supple | least one country of foreign application application on white Control Copy YES  Cartified Copy YES  Cartified Copy  YES  Cartified Copy  YES  Cartified Copy  YES  Cartified Copy  YES | Attached?  Attached?  NO  State below.  application a a atta sheet |  |  |

(Page 1 of 2)
Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO. Assistant Commissioner for Patents, Washington, DC 20231.



Please type a plus sign (+) inside this box -> [+

PTO/S8/01 (S-97)
Approved for use through 9/30/98. OM8 0651-0032 
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Papenwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## **DECLARATION** — Utility or Design Patent Application

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to potentiability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application. **Parent Patent Number PCT Parent Parent Filing Date U.S. Parent Application** (if applicable) (MM/DD/YYYY) Number Number Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto. As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patern and Trademark Office connected therewith: 

Customer Number Number Bar Code Registered practitioner(s) name/registration number listed below Label here Registration Registration Number Neme 31,511 GREGORY M. FRIEDLANDER Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto. Direct all correspondence to: Customer Number OR Correspondence address below or Bar Code Label GREGORY M. FRIEDLANDER & ASSOCIATES, P.C Name 11 SOUTH FLORIDA STREET Address Address 36606-1934 ALMOBILE State City Telephone (334) 470-0303 (334) 470-0305 U.S. OF AMERICA Fax Country I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filled for this unsigned inventor Name of Sole or First Inventor: Given Name (first and middle [if any]) Family Name or Surname **ANDERS** JOSEPH C. inventor's Deta 11/60 Signature MOBILE **AMERICA** ALResidence: City Country Citizenship 36607 2609 CAMERON ST., MOBILE, AL **Post Office Address** 2609 CAMERON ST., MOBILE, AL36607 Post Office Address U.S. OF

ZIP

36607

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

AMERICA

MOBILE

Additional inventors are being named on the

State

AL

City



Please type a plus sign (+) inside this box -> | +

PTO/SB/02A (3-97)
sign (+) inside this box 

Approved for use through 9/30/98. OMB 0651-0032
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## **DECLARATION**

## **ADDITIONAL INVENTOR(S)** Supplemental Sheet Page \_\_\_ of \_\_\_

| Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor |  |          |        |  |  | entor           |           |                 |             |               |
|--|--|----------|--------|--|--|-----------------|-----------|-----------------|-------------|---------------|
| Given Name (first and middle [if any])   |  |          |        |  |  | Family Na       | me or     | Surname         |             |               |
| KENNETH  |  |          | SALTER |  |  |                 |           |                 |             |               |
| Inventor's<br>Signature  | Kornt late                                 |          |        |  |  |                 |           | Date 2 11 00    |             | 2/11/00       |
| Residence: City  | MOBILE                                     | State    | AL     |  | Country                                | U.S. O          | F         | Citizensi       | hip         | USA           |
| Post Office Address  | 2COO CAMEDON CHI MODILE AL 26607           |          |        |  |  |                 |           |                 |             |               |
| Post Office Address  | 2609 CAMERON ST                            | r., MOI  | BILE,  | AL   | 3660                                   | 07              |           |                 |             |               |
| City   | MOBILE                                     | State    | ΑI     |  | ZIP                                    | 36607           | Countr    |                 | .S.<br>ERIC |               |
| Name of Addition   | nal Joint Inventor, if a                   | ny:      |        |  | A petitic                              | on has been fik | ed for th | nis unsign      | ed inv      | entor         |
| Given Na   | me (first and middle [if any               | 1)       |        |  |  | Family Na       | me or     | Surname         |             |               |
| SEACOL   | SEACOL CHIN                                |          |        |  |  |                 |           |                 |             |               |
| inventor's<br>Signature  | Searl Chri                                 |          |        | -  | Date 7                                 |                 |           | 2/11/00         |             |               |
| Residence: City  | MOBILE .                                   | State    | AL     |  | Country U.S. OF AMERICA                |                 | Citizer   | nship_          | USA         |               |
| Post Office Address 2609 CAMERON ST., MOBILE, AL 36607   |  |          |        |  |  |                 |           |                 |             |               |
| Post Office Address  | 2609 CAMERON S                             | г., мо   | BILE   | , AL   | 366                                    | 07              |           |                 |             |               |
| City   | MOBILE                                     | State    | Al     |  | ZIP                                    | 36607           | Cou       | ntry            | U.S<br>AMER | S. OF<br>RICA |
| Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor |  |          |        |  |  |                 |           |                 |             |               |
| Given Name (first and middle [if any]) Family Name or Surname                                    |  |          |        |  |  |                 |           |                 |             |               |
| MARK JONES   |  |          |        |  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                 |           |                 |             |               |
| inventor's<br>Signature  | Mark 11                                    | Mad More |        |  |  |                 |           | Da              | te          | 2-11-00       |
| Residence: City  | ·MOBILE                                    | State    | Al     | <u>.                                    </u> | U.S. OF<br>Country AMERICA             |                 | Citizer   | Citizenship USA |             |               |
| Post Office Address  | Address 2609 CAMERON ST., MOBILE, AL 36607 |          |        |  |  |                 |           |                 |             |               |
| Post Office Address  | Address 2609 CAMERON ST., MOBILE, AL 36607 |          |        |  |  |                 |           |                 |             |               |
| City   | MOBILE                                     | State    | A      | <br>L  | ZIP                                    | 36607           |           | U.S. OF AMERICA |             |               |

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.